

## **Regional HIT Extension Centers Meeting**

*Thursday, July 9, 2009: 3:00-4:30 p.m.*

Office of Vermont Health Access

### **AGENDA**

1. Review of federal Extension Center Program Notice
    - a. National Health Information Technology Research Center (HITRC) and Regional Extension Centers (or “regional centers”).
    - b. Goals:
      - encourage adoption of electronic health records by clinicians and hospitals;
      - assist clinicians and hospitals to become meaningful users of electronic health records; and
      - increase the probability that adopters of electronic health record systems will become meaningful users of the technology.
    - c. Regional centers will therefore, as a core purpose of their establishment, furnish direct, individualized, and (as needed) on-site assistance to individual providers.
  2. What’s the Region? What’s the time frame?
  3. Group Discussion about Vermont approaches to optimize funding preferences for:
    - a. Plans and implementation strategies incorporating multi-stakeholder collaborations that leverage local resources
    - b. Collaborators could include:
      - i. public and/or private universities with health professions, informatics, and allied health programs;
      - ii. state or regional medical/professional societies and other provider organizations;
      - iii. federally recognized state primary care associations;
      - iv. state or regional hospital organizations;
      - v. large health centers and networks of rural and/or community health centers;
      - vi. other relevant health professional organizations;
      - vii. the regionally relevant state Area Health Education Center(s);
      - viii. health information exchange organizations serving providers in the region;
      - ix. the Medicare Quality Improvement Organization(s)(QIO(s) serving providers that the proposed regional center aims to serve;
      - x. state and tribal government entities in the center’s geographic service area including, but not limited to, public health agencies; libraries and information centers with health professional and community outreach programs; and consumer/patient organizations.
    - c. Preference also given to applicants identifying viable sources of matching funds. Viable sources could include grants from states, non-profit foundations, and payment for services from providers able to make such payment. (For example, Medicaid providers could choose to contract with a regional center in lieu of a corporate vendor for implementation and meaningful use support services, for which costs are reimbursable under Section 1903 of the Social Security Act, as amended by the HITECH Act.
  4. Next Steps
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